OIPE VEITS

PTO/SDAG (13-04)
Approved for use through 7/3 V/2000, OMS 045 1-0332
U.S. Pethed and Trademin's Officer U.S. DEPARTMENT OF COLMERCE.
The Control of the College of the Coll

	PA	TENT APPL	CATIO	N FEE DETI Late for Form P	ERMINATIO	ON RECO	RD		Apple	rie 6392	Lander	
1:	APPLICATION AS FILED - PART ( 2-31-03 (Column 1) (Column 2)						SMALL ENTITY			OTHER THAN SMALL ENTITY		
	FOR	MUM	BER FILED	NAG	ER EKTRA	RATE	(F)	FEEIS		RATE (1)	FEE (%)	
	CPR LIGHT, DI C	(en)	N/A N/A		NEA NEA					NEA	\$770.00	
	ARCH FEE	(m)								MEA	\$770.00	
EX	MINATION FEE	<b>(50)</b>	NZA		ARA					REA		
Ø	CAL CLAIMS CFR 1,1000)		42 strus 20.		• 22		•		œ.	x \$18 a	\$258.00	
NOEPENOENT CLAIMS D7 CFR 1,15(N)		VIAS 6	6 minus 3 =		- 0					* \$86 =	\$250.00	
API FEI	LICATION SEE	sheets of \$250 addison	f paper, ( \$125 for u) 50 she	n and drawings he application a smail entity) for sis or fraction th )(G) and 37 CF	ike fee due reach screef. Gee							
MU	LTIPLE DEPENDENT CLAIM PRESENT (17 CFR L16(8)					HIA				NA		
	the difference in column 1 is less than zero, enter W is column 2.					TOTA				TOTAL	\$1424.0	
7-				(Column 2)	durn 2) (Caluma 3) SMALL ENTITY			YTTY	OR	OTHER THAN SMALL ENTITY		
AMENDMENT A		REMAINING AFTER ALAEMOMENT		NUMBER PREVIOUSLY FAID FOR	PRESENT EXTRA	RATE (	n	TIONAL PEE (T)		RATE (I)	ADOI- TIONAL PEE (1)	
	Total prom usp)	199	Miras	<b>42</b>	* 0	x			<b>OR</b>	х =		
	DE OFFI CHOM	3	Minus	<b>6</b>	0	x	•		CR	X =		
	Application Size Fee (37 CFR 1.16(d))						_					
`	FIRST PRESENTATION OF MULTIPLE DEPCHDENT CLAM (27 CFB 1/10))					MIA			CA	NA		
						TOTAL ADD'L FE	<b>#</b>		OR	TOTAL ADD'L FEE	\$0.0	
		(Cotumn 1)		(Column 2) HIGHEST	(Column 3)			-				
NT B		REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	0	ADDI- TIONAL FEE (1)		RATE (#)	ADDI- TIONAL FEE (1)	
ENDMENT	Cotal Corces sings	•	Minus	•		x			OR	x -		
2	factal sequil	•	Mirars		w	×	J		OR	x a		
¥.	Application Size Fee (37 CFR 1.16(4))						$\Box$					
4	FIRST PRESENTATION OF MUSTIPLE DEPENDENT CLAIM (17 CFR 1, WG)					NIA			DR	MFA		
						TOTAL		5-0-0-0-0	OR	TOTAL		

The "Highest Number Previously Pidd For" (Total or Independent) is the Nichest number found in the apprepriate box in column 5.
This collection of Information is sequent by 37 CFR 1.18. The Information is equived to obtain or retain a beneality the public which is to tile (and by the USPTO to process) an application Contributed by the public which is to tile (and by the USPTO). The collection is estimated to take 12 cultures to complete, including gatherine, preparing, and submitting the completed explication from to the USPTO. Then will vary depending upon the included case. Any comments on the annual of time you explice to complete this form entitor suppositions for reducing this busden, should be sent to the Chief Information Officer, U.S. Patient and Transformatic Office, U.S. Department of Commence, P.D. Bert 1450, Alexandria, VA 22313-1450, DO NOT SENO FIESS OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Commissioner for Patients, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, cell 1-800-PTO-0139 and select option 2